

MAY 24 2002

PTO/SB/01 (10-01)  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	101.US5.REG
	<b>First Named Inventor</b>	Daniel COHEN, et al.
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	10 / 051,681
	<b>Filing Date</b>	January 16, 2002
	<b>Art Unit</b>	1645
<b>Examiner Name</b>		Unassigned

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TREATMENT OF CNS DISORDERS USING D-AMINO ACID OXIDASE AND D-ASPARTATE OXIDASE ANTAGONISTS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

01/16/2002

as United States Application Number or PCT International

Application Number 10/051,681

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

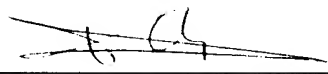
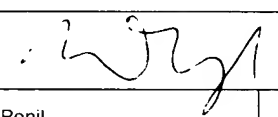
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/>		Customer Number or Bar Code Label	000027206	OR	<input checked="" type="checkbox"/>	Correspondence address below	
John Lucas Ph D J D							
Name Genset Corp.							
Address 10665 Sorrento Valley Road							
City San Diego				State CA		ZIP 92121-1609	
Country USA			Telephone 858/597-2600			Fax 858/597-2601	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Daniel				Family Name or Surname COHEN			
Inventor's Signature 				Date 8/3/00			
Residence: City Paris		State		Country France		Citizenship France	
Mailing Address 12, av. du Recteur Poincare							
City Paris		State		ZIP 75016		Country France	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Ilya				Family Name or Surname CHUMAKOV			
Inventor's Signature 				Date 13.03.02			
Residence: City Vaux-le-Penil		State		Country France		Citizenship France	
Mailing Address 691, rue de la Noue							
City Vaux-le-Penil		State		ZIP 77000		Country France	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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Please type a plus sign (+) inside this box → ☐

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## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/051,681
Filing Date	January 16, 2002
First Named Inventor	Daniel COHEN, et al.
Group Art Unit	1645
Examiner Name	Unassigned
Attorney Docket Number	101.US5.REG

I hereby appoint:

☐ Practitioners at Customer Number

000027206

Place Customer  
Number Bar Code  
Label here

OR

☒ Practitioner(s) named below:

Name	Registration Number
John M. Lucas	43,373
Peter Follette	46,213
Lukas R. Voellmy	43,358
Deno Dialynas	50,711
Carol Johns	50,463

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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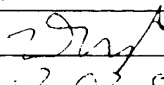
<input checked="" type="checkbox"/> Firm or Individual Name	John Lucas, Ph.D., J.D.				
Address	Genset Corporation				
Address	10665 Sorrento Valley Road				
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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

### SIGNATURE of Applicant or Assignee of Record

Name	Ilya Chumakov
Signature	
Date	12 03 02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

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☐ The above-mentioned Customer Number.

OR

☒ Firm or  
Individual Name

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Address

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### SIGNATURE of Applicant or Assignee of Record

Name

Daniel Cohen

Signature

Date

3/3/02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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